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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) SON-3470	
Application Number 10/589,992-Conf. #2447		Filed August 18, 2006	
For REMOTE CONTROL SYSTEM, REMOTE CONTROL COMMANDER, REMOTE CONTROL SERVER			
Art Unit 2612		Examiner J. J. Yang	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
		<u>Fee</u>	<u>Small Entity Fee</u>
<input checked="" type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$150	\$75 \$ 150.00
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$560	\$280 \$
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$1270	\$635 \$
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$1980	\$990 \$
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$2690	\$1345 \$
<input type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27.		
<input type="checkbox"/>	A check in the amount of the fee is enclosed.		
<input type="checkbox"/>	Payment by credit card. Form PTO-2038 is attached.		
<input checked="" type="checkbox"/>	The Director has already been authorized to charge fees in this application to a Deposit Account.		
<input checked="" type="checkbox"/>	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 18-0013		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the	<input type="checkbox"/>	applicant/inventor.	
	<input type="checkbox"/>	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).	
	<input checked="" type="checkbox"/>	attorney or agent of record. Registration Number 40,290	
	<input type="checkbox"/>	attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34	
_____ Signature		_____ Date	
_____ Christopher M. Tobin Typed or printed name		_____ (202) 955-3750 Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input type="checkbox"/>	Total of 1 forms are submitted.		

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